24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E) FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	
AUTISM HEAR US NOW LLC	C C00671685
	J state and
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee North Star Multimedia	Date of Public Distribution/Dissemination
	10 29 2018
Mailing Address 9360 W. Flamingo	
#110-226	Amount
City State Zip Coo	
Las Vegas NV 89147	Transaction ID : SE-20201 Date of Disbursement or Obligation
Purpose of Expenditure Advertising - Print Category T	
Name of Federal Candidate	✗ Support Office Sought: ✗ House District: 04
Smith, Christopher, H, ,	Oppose President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary Seneral 2018 Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Coo	ode
	Date of Disbursement or Obligation
Purpose of Expenditure Category	
Name of Federal Candidate	Support Office Sought: House District:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······································
(c) TOTAL Independent Expenditures	5000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Cappleman, Oliver, , , [Electronically File	led) Date 10 25 2018
Signature	